ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE/
	ne//		10/19/01
FEE DETERMINATION	<u>\U</u>		160 1111
O.I.P.E. CLASSIFIER			11-02-01
FORMALITY REVIEW	1-12	WIX	1100
RESPONSE FORMALITY REVIEW	W.D.	M	01-14-02
	T		

INDEX OF CLAIMS

~	Rejected	. (N	Non-elected
=	Allowed		ı	Interference
_	(Through numeral) Canceled		Α	Appeal
÷	Restricted	(0	Objected

Claim V Date	Claim Date	Claim Date
Final Original St. 5 (2)	Final Original (1/2/2/29/2	Final Original
	51 2 4=	101
	52	102
7 3 1 1 1 1	53	103
4	54	104
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9	59	109
10	60	110
	61	111
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21 1	70	121
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25	75 J V	125
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30	79	129
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33	83	132
34	84	133
(35)	85	135
36	86	136
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43	93	143
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45	95	144
46	96	146
47	97	147
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49	99	149
50 1/1/1/1	100	150

If more than 150 claims or 10 actions staple additional sheet here

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